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**OFFICE OF PUBLIC INSTRUCTION**

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**Linda McCulloch**  
Superintendent

**Application to Participate in  
Montana Comprehensive Assessment System (MontCAS)  
Test Development Projects**

This is a general application which will be kept on file; however, if there is a specific project that is described in a current *JUMP* newsletter, please indicate below which one you would like to participate in. Please fax your application to Judy Snow at OPI, 406-444-1373. Thank you.

**NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**JOB TITLE:** \_\_\_\_\_

**SCHOOL SYSTEM:** \_\_\_\_\_

**SCHOOL NAME:** \_\_\_\_\_

**SCHOOL ADDRESS (Including City and Zip Code)**

\_\_\_\_\_

**HOME ADDRESS (Including City and Zip Code)**

\_\_\_\_\_

**TELEPHONE:**      School \_\_\_\_\_      Home \_\_\_\_\_

**EMAIL:**      School \_\_\_\_\_

Home \_\_\_\_\_

I live in excess of 90 miles    \_\_\_\_ Yes \_\_\_\_ No

If lodging is needed, I prefer a \_\_\_\_\_ Smoking Room \_\_\_\_\_ Non-Smoking Room

Please state any special requests or needs here.

*"It is the mission of the Office of Public Instruction to improve teaching and learning through communication, collaboration, advocacy, and accountability to those we serve."*

Please complete the following sections of this application so that we can match your expertise with projects. Thank you.

<b>Grades in which you have had recent classroom (last 3 years) experience (mark all that apply please.)</b> <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 10	<b>Subjects in which you have had recent classroom (last 3 years) experience (mark all that apply please.)</b> <input type="checkbox"/> Reading <input type="checkbox"/> Math <input type="checkbox"/> Science
<b>Other areas in which you have had recent classroom (last 3 years) experience (mark all that apply please.)</b> <input type="checkbox"/> Special Education <input type="checkbox"/> Title III Programs <input type="checkbox"/> Reading First Grants <input type="checkbox"/> With students with Limited English Proficiency <input type="checkbox"/> Beta Testing of CRT-Alternate <input type="checkbox"/> Field Testing of English Language Proficiency Test <input type="checkbox"/> 21 <sup>st</sup> Century Grants	<b>Recent (last three years) roles other than classroom experience (mark all that apply please)</b> <input type="checkbox"/> Curriculum Director <input type="checkbox"/> School Principal <input type="checkbox"/> System Superintendent <input type="checkbox"/> County Superintendent <input type="checkbox"/> Special Education Director <input type="checkbox"/> Title Director <input type="checkbox"/> Title III Director <input type="checkbox"/> System Test Coordinator <input type="checkbox"/> School Test Coordinator

If there is notification in a current *JUMP* newsletter about a project in which you would like to participate, please name the project here.

**PROJECT:** \_\_\_\_\_

Please FAX this form to Judy Snow at OPI: **406-444-1373**. We are happy to know you are interested in participating and look forward to working with you. We will contact you with project needs.

Thank you.